## 13031092342

FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED

012 ...

			rold Oll Aude assistant -
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FEEDSMAIL CENTER
GREGORY RAD	THP 12014 1		
ADDRESS (number and street)	4,0,0,0, BARR	AMCA PARKA	(A.Y
<ul><li>(Check if address is changed)</li></ul>	S 15 1250		
	CITY A		CA   92604 - L
COMMITTEE'S E-MAIL ADDRESS			
(Check if address is changed)	VIEF FRIGEREGI	RAITHSIFIOIRICIO	NGGRESS - COM
	Optional Second E-Mail Addi		R(0,N,GREJJ:,COM,
COMMITTEE'S WEB PAGE ADDRESS (URL)			
<ul><li>(Check if address is changed)</li></ul>	GREGRATHS	FORGONGRES	SC.O.M.
2. DATE 87 15 2013			
3. FEC IDENTIFICATION NUMBER > C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.			
Type or Print Name of Treasurer			
Signature of Treasurer	4/10 C	>	Date 87 15 2013
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.			
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	EFL. FLIBNI 1